

Local AO 440 (Rev. 8/12) Summons in a Civil Action

# UNITED STATES DISTRICT COURT

for the

District of North Dakota

American Medical Association, on behalf of itself and its members, Access Independent Health Services, Inc. d/b/a

Red River Women's Clinic, on behalf of itself, its physicians, and its staff, and Kathryn L. Eggleston, M.D.

*Plaintiff*

v.

Wayne Stenehjem, in his official capacity as Attorney General for the State of North Dakota, and Birch Burdick, in his official capacity as State Attorney for Cass County, as well as their employees, agents, and successors

*Defendant*

Civil Action No. 1:19-cv-125

## SUMMONS IN A CIVIL ACTION

To: Above Named Defendant(s)

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

Thomas A. Dickson  
Dickson Law Office  
PO Box 1896  
Bismarck, North Dakota 58502

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

ROBERT ANSLEY, CLERK OF COURT

/s/ Carla Schultz, Deputy Clerk

Date: June 25, 2019



Signature of Clerk or Deputy Clerk

Civil Action No. 1:19-cv-125

**PROOF OF SERVICE***(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))*

This summons for *(name of individual and title, if any)* \_\_\_\_\_  
 was received by me on *(date)* \_\_\_\_\_.

☐ I personally served the summons on the individual at *(place)* \_\_\_\_\_  
 \_\_\_\_\_ on *(date)* \_\_\_\_\_; or

☐ I left the summons at the individual's residence or usual place of abode with *(name)* \_\_\_\_\_  
 \_\_\_\_\_, a person of suitable age and discretion who resides there,  
 on *(date)* \_\_\_\_\_, and mailed a copy to the individual's last known address; or

☐ I served the summons on *(name of individual)* \_\_\_\_\_, who is  
 designated by law to accept service of process on behalf of *(name of organization)* \_\_\_\_\_  
 \_\_\_\_\_ on *(date)* \_\_\_\_\_; or

☐ I returned the summons unexecuted because \_\_\_\_\_; or

☐ Other *(specify)*: \_\_\_\_\_  
 \_\_\_\_\_.

My fees are \$ \_\_\_\_\_ for travel and \$ \_\_\_\_\_ for services, for a total of \$ \_\_\_\_\_.

I declare under penalty of perjury that this information is true.

Date: \_\_\_\_\_

\_\_\_\_\_  
*Server's signature*

\_\_\_\_\_  
*Printed name and title*

\_\_\_\_\_  
*Server's address*

Additional information regarding attempted service, etc: